item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  2. Article Addressed to:  3. Service Type Se	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Certified Mail	item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  OI-224  P.O. Rox 150846	D. Is delivery address below:   No
Registered Return Receipt for Merchandises Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee) Yes  2. Article Number (Copy from service label)  OO23 077 3549	NASWILE, IN 31/215	
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0023 0771 3549	. 95 '	4. Restricted Delivery? (Extra Fee)
PS Form 3811 July 1999 Domestic Return Receipt 102595-W-M-0952	2. Article Number (Copy from service label)  OO23 077 3549	
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